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Substitute for form 1449/PTO				<b><i>Complete if Known</i></b>	
<b>THIRD SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>				Application Number	10/618,299
				Filing Date	July 11, 2003
				First Named Inventor	BARSOUM, James G.
				Art Unit	1633
				Examiner Name	KELLY, Robert M.
Sheet	1	of	1	Attorney Docket Number	2159.0830001/EJH/SAS

## **NON PATENT LITERATURE DOCUMENTS**

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Examiner Signature	/Robert Kelly/ (10/13/2008)	Date Considered	/Robert Kelly/ (10/13/2008)
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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**ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /RMK/**

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